

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000112496

FILED
Mar 24, 2011
Secretary of State

Entity Name: TARPON RIVER ART CENTER (TRAC) L.L.C.

Current Principal Place of Business:

614 SW FLAGLER AVE.
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

614 SW FLAGLER AVE.
FORT LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: 45-0545573

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'REILLY, JOANNE
1913 SW 10TH AVE.
FORT LAUDERDALE, FL 33315 US

Name and Address of New Registered Agent:

MILLER, LARRY JOE
1607 JOHNSON STREET
HOLLYWOOD, FL 33020 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: LARRY JOE MILLER

03/24/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: EDELSTEIN, NANCY L
Address: 1127 SW 5 PLACE
City-St-Zip: FT. LAUDERDALE, FL 33312

Title: MGRM
Name: FEIN, SANDRA
Address: 5840 NE 14TH TERRACE
City-St-Zip: FORT LAUDERDALE, FL 33334

Title: MGRM
Name: COLLINS, DENISE
Address: 6425 PINEHURST CIRCLE WEST
City-St-Zip: TAMARAC, FL 33321

Title: MGRM
Name: GORMLEY, REBECCA L
Address: 353 SUNSET DR APT. 4
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: MGRM
Name: O'REILLY, JOANNE
Address: 1913 SW 10TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: MGRM
Name: O'REILLY, ROBERT
Address: 1913 SW 10TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33315

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LARRY JOE MILLER

REG

03/24/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date